



# Office of the State Fire Marshal

## Request Form for:



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| <input type="checkbox"/> Life Safety House (trailer)    | <input type="checkbox"/> Dalmatian/Sparky Suit   |
| <input type="checkbox"/> Sparky Hazard House (tabletop) | <input type="checkbox"/> Earthquake Safety House |
| <input type="checkbox"/>                                |  |

Instructions	1. Complete form including signature/typed name and date 2. Print and email to <a href="mailto:stanrobins@utah.gov">stanrobins@utah.gov</a> or print and Fax to: 801-284-6351 or Mail to: Office of the State Fire Marshal 5272 South College Drive #302, Murray, Utah 84123		
Department Name		Contact Person	Phone number with area code
Mailing Address, City, Zip		Alt phone number	
Email		Fax number	

### List Possible Dates

Choice #1			Choice #2			Choice #3		
	Date m/d/yy	Time		Date	Time		Date	Time
Delivery			Delivery			Delivery		
Event Start			Event Start			Event Start		
Event End			Event End			Event End		
Pick Up			Pick Up			Pick Up		

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Fire Dept Event <input type="checkbox"/> School Program <input type="checkbox"/> Type Of Event      Safety Fair <input type="checkbox"/> Other: <input type="checkbox"/>			
EMS Event <input type="checkbox"/> City or Town Fair <input type="checkbox"/> County Fair <input type="checkbox"/>			
We can pick up <input type="checkbox"/> We can return <input type="checkbox"/>			

Describe your event:
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For Life Safety House, describe where to place trailer:
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Location of Event	Address	Phone
Delivery Location, if different	Address	Phone

I agree that while in the above listed organization's possession, all policies for the Life Safety House will be followed. In addition, I agree to notify the State Fire Marshal's Office of any damages of the Life Safety House or any of its contents. We will follow all applicable laws while using the Life Safety House and hold harmless the State, Department of Public Safety, and the Fire Marshal's Office for any negligence as a result of misconduct or improper use by the user.	
Signature (by typing in your name you agree to the above statement)	Date

For Office Use Only					
Approval Date		Conf. Sent		Disapproved due to	
Date/Time of Delivery			Date/Time of Pick-up		